
SEPA Training of Facilitators Curriculum

SEPA Training Day 3 Agenda

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OVERVIEW OF TRAINING FOR DAY 3

During Day 3 of the training, facilitators will review what was learned during Day 2, participate in teach-backs of Sessions 2 and 3, and participate in Sessions 4 and 5.



Trainer's Note:

- Encourage questions
- Provide time for discussion
- Check to see if facilitators need a break

Facilitators will have the opportunity to participate in each session as if they were SEPA participants, as well as practice facilitation skills and participate in session debriefings. Facilitators should be encouraged to ask questions throughout each session.

Welcome Facilitators



Time: 10 minutes

Trainers should begin Day 3 by reviewing major topics, times for breaks, and the scheduled time to end for the day.

*Welcome back and thank you for taking the time to participate in this training.
Let's review today's agenda.*

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We will begin by reviewing what we learned yesterday and clarifying any issues. We will conduct teach-back exercises from Sessions 2 and 3 and will continue with Sessions 4 and 5. To learn how to facilitate SEPA, we think it's important that you experience each session as if you were SEPA participants. Just like yesterday, we will use the Stop and Go signs. When you are wearing the sign with the word "Stop" facing the group, I will be talking to you as facilitators. When you are wearing the sign with the word "Go" facing the group, you will act as participants. When you are in this role, I will be the facilitator. Please feel free to interrupt at any time to ask questions.

I look forward to working with you today and hope we will learn from each other's experiences in implementing prevention programs.

Please begin today with the word "Stop" facing the group.

REVIEW OF DAY 2



Discussion



Purpose: To review topics from Day 2 and respond to questions or concerns from Day 2



Needed Equipment, Supplies, and Materials: newsprint, markers



Time: 150 minutes

Ask facilitators to discuss what they learned during Day 2.

Sessions 2 and 3 cover a lot of material, and I know it was a long day yesterday. Before we get to specific questions, I want to know how you're feeling.

Questions to prompt discussion:

- *How do you feel this morning about yesterday's training?*
- *What worked well and what didn't work for you?*

Note concerns on newsprint and facilitate discussion to address concerns.

Thank you.

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Question to prompt discussion:

- *Because Session 2 contains so much information and there aren't any interactive exercises, what are your suggestions for keeping participants engaged?*

Possible responses:

- Try to lighten up the session with humor; tell a few jokes.
- Ask participants to share stories about friends who got STDs.

Question to prompt discussion:

- *Do you have concerns that some participants may not return for Session 3 because Session 2 had so much information? What can you do to motivate participants to come back for Session 3?*

Possible responses:

- Remind them that they must attend three sessions to get a certificate during Session 6.
- Tell them that discussion about the homework assignment will be very interesting and you don't want to miss it.
- Let them know that Session 3 is interactive and they will learn tricks for making condom use sexy in Session 4.

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Parking Lot Issues

If parking lot issues were noted on the newsprint, be sure to discuss them.

Teach-Backs



Teach-Backs



Purpose: To provide facilitators with the opportunity to practice activities in Project SEPA



Needed Equipment, Supplies, and Materials: Teach-back feedback form



Time: 140 minutes

Make enough copies of the teach-back form so that facilitators can fill out a form for each presenter.

It's time to conduct teach-backs. Hopefully, those of you who were assigned teach-backs found some time to review your session topic and rehearse the scripts.

The selected facilitators will spend approximately 15 minutes conducting their teach-backs using the Facilitators Guide for reference. Your fellow facilitators and I will act as SEPA participants. If the activity is longer than 15 minutes, please abbreviate some of the components so that you are able to capture all

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points. We will use the teach-back feedback form to provide feedback after you have completed the teach-back.

Provide facilitators with the teach-back feedback form located in the appendix of this curriculum.

We will provide feedback on the facilitator's presentation skills, such as eye contact, volume, rate of speech, and body language. The goal of the feedback is to help you improve your facilitation skills. We will conduct the teach-backs in the order of the material, starting with session 2. Does anyone have questions before we begin?

Wait for response. After responding to all questions, ask the two facilitators to begin implementing the assigned teach-backs.



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

After one facilitator has completed her teach-back, ask participants to return their signs to Stop.



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

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Ask the facilitator to comment on her own performance, noting what she thinks went well and what may need improvement. Other facilitators should also provide feedback. To help facilitators engage in feedback, ask the following questions:

- *What are [name of facilitator]'s strengths?*
- *What can [name of facilitator]'s do to improve her implementation of the activity?*
- *Was the facilitator prepared to train?*
- *Did the facilitator demonstrate good communication skills?*
- *Did the facilitator effectively manage difficult situations?*
- *Did the facilitator effectively manage time?*

After facilitators have provided feedback, the trainer should provide constructive comments and recommendations and then conclude the teach-back session.

Repeat this process for each facilitator.

BREAK

SESSION 4: WAYS TO IMPROVE COMMUNICATION WITH OUR PARTNERS

Introduction



Purpose: To introduce Session 4 and its materials and core elements



Time: 5 minutes

The goal of Session 4 is to learn how to communicate and negotiate better with partners. Communication and condom negotiation skills will be taught and practiced. As with previous sessions, you will act as facilitators and as SEPA participants. I will demonstrate activities and you will have opportunities to practice them. Please ask questions.

Let's open the Facilitators Guide to Session 4. Like previous sessions, there's an overview and a list of the materials you need. For Session 4 you will need:

- ☐ *Facilitators Guide*
- ☐ *Participant Workbooks*
- ☐ *CD of Session 4 PowerPoint slides*
- ☐ *LCD projector*
- ☐ *Laptop computer*
- ☐ *Screen*
- ☐ *Podium*
- ☐ *Newsprint*
- ☐ *Easel stand*
- ☐ *Paper*

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- ☐ *Markers*
- ☐ *Pens and pencils*
- ☐ *Nametags*
- ☐ *Hat or bowl*

Turn to the Session 4 core elements page of the Facilitators Guide. For each core element, you can see the associated activity.

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Core Elements

CORE ELEMENT	ACTIVITIES
<p>Core Element 1: Provide culturally and linguistically appropriate information to sexually active women at risk of acquiring HIV from unprotected sex with male partners in interactive, small group sessions that focus on</p> <ul style="list-style-type: none"> • HIV and STD transmission and prevention; • human sexuality and male and female anatomy; • interpersonal communications; and • relationship violence. 	<p><u>Discussions</u></p> <ul style="list-style-type: none"> • What is self-esteem? • What is communication? • Communication styles • Assertive communication • Condom negotiation • How to begin a conversation about condom use <p><u>Group Activities</u></p> <ul style="list-style-type: none"> • Self-esteem and how it affects relationships • Practicing condom negotiation
<p>Core Element 2: In addition to presentations and discussion, incorporate skill-building activities to enhance women's self-efficacy for safer sex behaviors, including demonstrations and practice exercises on male and female condom use and role-playing on assertive communication with sex partners, including condom negotiation.</p>	<p><u>Role-Plays</u></p> <ul style="list-style-type: none"> • Practicing assertive communication skills • Practicing condom negotiation
<p>Core Element 3: Build self-efficacy and knowledge for safer sex behaviors, improved communication with partners, and violence management through homework exercises and the sharing of personal experiences.</p>	<p><u>Homework</u></p> <ul style="list-style-type: none"> • Homework review • Homework assignment

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IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

WELCOME PARTICIPANTS



Discussion



Purpose: To welcome participants back, review the key messages from Session 3, review Session 3 homework, and introduce Session 4



Needed Equipment, Supplies, and Materials: Session 4 Slides 1–3, Participant Workbooks



Time: 10 minutes

Welcome participants back to SEPA and encourage them to talk to each other before you officially begin the session.

Welcome back. It's great to see you again, and I hope you all had a good week. I've been looking forward to this session. Today we will discuss self-esteem, partner communication, and condom negotiation. I hope you enjoy participating in this session and learning from each other. Remember that by participating in SEPA, you are helping yourself, your family, and your community. There is a lot to cover in this session so let's get started.

Session 3 Review

Session reviews help reinforce lessons learned from the previous session. Use this time to answer questions about topics in Session 3.

During Session 3 we learned the ABCs — Abstinence, Be faithful, and Condom use — of HIV prevention. We also learned how to use male and female condoms. Here are some review questions.

- *What is the most effective way for a woman to prevent getting a sexually transmitted disease?*

(Answer: abstinence)

- *When is a good time to use a female condom?*

Possible responses:

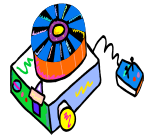
- When you don't want to ask your partner to use a condom.
- When you know your partner will argue about using condoms.

- *What kind of lubricant is best to use with male condoms?*

(Answer: water-based lubricants, not lubricants with oil, such as petroleum jelly and lotions)

Before we begin Session 4, let's review key messages from Session 3.

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Show Session 4 Slide 1

Session 3 Key Messages

- There are three ways to protect yourself from sexually acquired HIV and other sexually acquired STDs:
 1. Abstinence from sex
 2. Mutual fidelity to one partner who you know is free of infection
 3. Correct and consistent use of condoms
- Abstinence from sex is the only foolproof way to prevent sexually transmitted HIV.
- You can protect your health by refusing to have unprotected sex until you know your partner is not infected with an STD, including HIV.

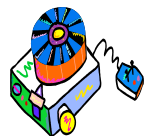


SEPA Session 4: Ways To Improve Communication With Our Partners

There are three ways to protect yourself from sexually acquired HIV and other STDs: abstinence from sex, mutual fidelity with one partner who is free of infection, and correct and consistent use of condoms.

Abstinence from sex is the only foolproof way to prevent sexually transmitted HIV.

You can protect your health by refusing to have unprotected sex until you know your partner is not infected with an STD, including HIV.



Show Session 4 Slide 2

Session 3 Key Messages

- Correct and consistent use of male or female condoms is an effective way to prevent HIV, and many other STDs. Condoms also prevent unwanted pregnancy.
- Check the expiration date on the condom package.
- Use only water-based lubricants on male latex condoms.
- Never use the same condom more than one time.



SEPA Session 4: Ways To Improve Communication With Our Partners

Correct and consistent use of male latex condoms or female condoms is an effective way to prevent many STDs, including HIV and AIDS. Condoms also prevent unwanted pregnancy.

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Check the expiration date on the condom package.

Use only water-based lubricants on male latex condoms.

Never use the same condom more than one time.

Emphasize to participants the importance of the knowledge they gained during Session 3 and how it is vital to share this knowledge with their partners, families, friends, and neighbors.

It's so important to share the knowledge you gained during Session 3 with partners, families, friends, and neighbors. By sharing what you learn with others, you help educate the people you care about and teach them how to protect their health.

Homework Review

Let's spend a few minutes talking about your homework assignment.

Questions to prompt discussion:

- *Who did you speak with about HIV prevention?*
- *What was it like to start the conversation?*
- *What information did you share about HIV prevention?*
- *Do you have any questions or comments about talking to others about HIV and STD prevention?*

Are there other questions before we begin?

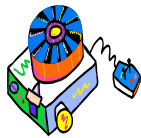
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Facilitator's Note:

Thank the participants for completing their homework and sharing with the group.

Session Objectives



Show Session 4 Slide 3

Session 4 Objectives

By the time we finish today, you will be able to:

- Explain how self-esteem impacts relationships
- Use assertive communication
- Negotiate the use of condoms with your sex partners



SEPA Session 4: Ways To Improve Communication With Our Partners

3

Here are the objectives of Session 4.

By the time we finish today, you will be able to:

- *Explain how self-esteem impacts relationships*
- *Use assertive communication*
- *Negotiate the use of condoms with your sex partners*

WHAT IS SELF-ESTEEM?



Discussion



Purpose: To discuss self-esteem and identify how self-esteem impacts intimate relationships



Needed Equipment, Supplies, and Materials: Slide 4, newsprint, markers



Time: 15 minutes

In this session, we will discuss how to communicate effectively with an intimate partner. However, before we learn effective communication strategies, it is important to understand the concept of self-esteem and how self-esteem affects a relationship.

Question to prompt discussion:

- *What is self-esteem?*

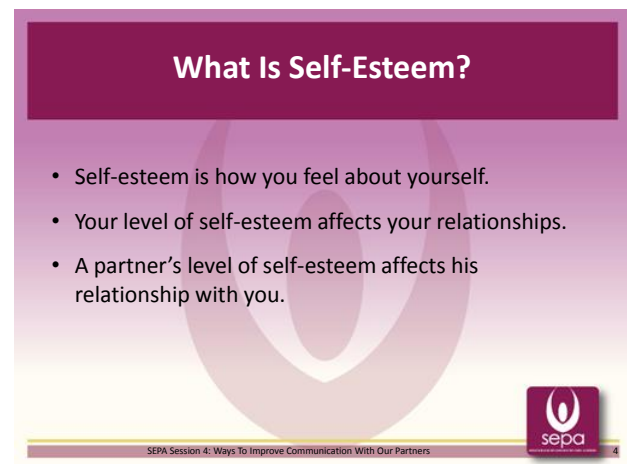
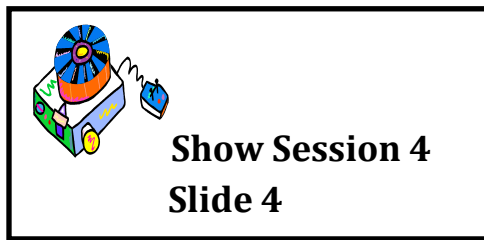
Possible responses:

- Whether you think you're a good person
- What you think about yourself

Encourage participants to share their personal definitions of self-esteem.

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Write these definitions on the newsprint. After participants have shared their definitions, define self-esteem.



Here's how we define self-esteem in SEPA: Self-esteem is someone's subjective appraisal of his or her value as a person, or, how you feel about yourself. Self-esteem may be low or high or somewhere in between.

Your level of self-esteem affects your relationships, including intimate ones.

Your partner's level of self-esteem affects his relationship with you.

A woman with high self-esteem knows she is a valuable person. She treats herself with respect and requires respectful relationships. This means she protects her physical and mental health, and she doesn't let other people mistreat or take advantage of her. A woman with high self-esteem is not threatened by people who have different opinions and may disagree with her. Words that describe her are mature, confident, self-assured, and honest.

Questions to prompt discussion:

- *How do you think a woman with low self-esteem would think about herself?*
- *What characteristics would you use to describe a woman with high self-esteem?*

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Possible responses:

- A woman with low self-esteem could think her opinions don't matter and that her feelings are not important.
- A woman with high self-esteem is strong; she doesn't have to depend on a man to make all the decisions.

Here's an important point about self-esteem: Our self-esteem affects how we relate to others. Women with low self-esteem may not communicate well with their partners, whereas women with high self-esteem have the ability to communicate with their partners about important issues. This kind of communication can lead to fewer conflicts.

Self-Esteem and How it Affects Relationships



Group Activity



Purpose: To identify how self-esteem impacts intimate relationships



Needed Equipment, Supplies, and Materials: Slides 5–6, Participant Workbooks

Many women do not realize how self-esteem impacts relationships. The goal of this activity is to help women understand how their self-esteem and the self-esteem of partners relate to the health of their relationships.

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Ask the participants to turn to the “Session 4, Worksheet 1: Low vs. high Self-Esteem” in their workbooks. Ask them to identify which traits or characteristics reflect low and high self-esteem. Give them five minutes to complete the worksheet. After participants have completed the activity, review their choices with the group.

Let's start. When a woman is confident, do you think she has low or high self-esteem?

Continue going through the list of traits.

Question to prompt discussion:

- *Is it possible for a woman to have high self-esteem in some situations and low self-esteem in other situations?*

Possible responses:

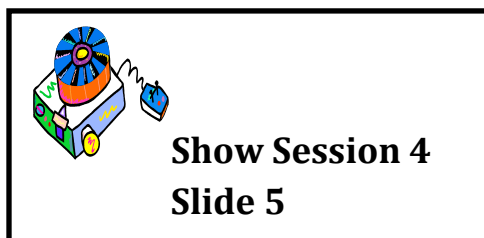
- I don't think so. You either have good, or high, self-esteem or you don't.
- Yes. For example, a woman can be confident and have high self-esteem but not be confident giving a presentation before a big audience.
- You can generally have high self-esteem and be confident, but certain people can scare you and when you're with them your self-esteem is not so good.

Because some of us think that self-esteem can vary based on a situation or being with certain people, we should keep in mind that the following remarks apply in general. They do not apply to all people.

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Women with high self-esteem are generally confident and feel good about themselves. They will not allow other people to mistreat them. On the other hand, women with low self-esteem are less likely to be confident, generally don't feel good about themselves, and often allow people to take advantage of them. Because of low-self esteem, some women may engage in risky behaviors.


In general, people with low self-esteem tend to have unhealthy relationships, whereas people with high self-esteem tend to have healthy relationships.



Self-Esteem and the Health of Relationships

In general, partners in an unhealthy relationship are likely to have:

- poor communication skills.
- a tendency to avoid talking about issues that can cause conflicts.
- difficulty expressing their feelings.
- a hard time accepting each other's different thoughts and opinions.
- problems with loyalty and trust.
- extreme psychological, economic, and sexual dependence on each other.



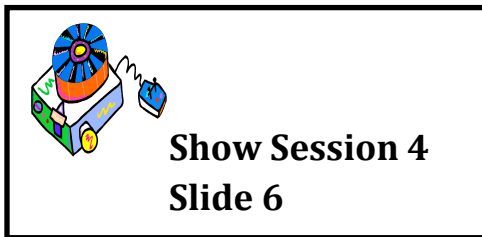
SEPA Session 4: Ways To Improve Communication With Our Partners

In general, partners in an unhealthy relationship are likely to have:

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- *a tendency to avoid talking about issues that can cause conflicts.*
- *difficulty expressing their feelings.*
- *a hard time accepting each other's different thoughts and opinions.*
- *problems with loyalty and trust.*

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- *extreme psychological, economic, and sexual dependence on each other.*



Self-Esteem and the Health of Relationships

But, partners in a healthy relationship are more likely to have:

- frequent dialogue without the fear of conflict due to different opinions.
- open expression of feelings.
- acceptance of individual differences.
- mutual loyalty and trust.
- a violent-free relationship.
- mutual support without extreme dependence on each other.

SEPA Session 4: Ways To Improve Communication With Our Partners



But, partners in a healthy relationship are more likely to have:

- *frequent dialogue without the fear of conflict due to different opinions.*
- *open expression of feelings.*
- *acceptance of individual differences.*
- *mutual loyalty and trust.*
- *a violent-free relationship.*
- *mutual support without extreme dependence on each other.*



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

Question to prompt discussion:

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- *How might cultural or gender-specific values impact a woman's self-esteem?*

Possible responses:

- Latino women may not value assertiveness, individual responsibility, and expressing feelings — some of the things we're saying reflect a woman with high self-esteem.
- Machismo and Marianismo probably affect a Latina's sense of self-esteem; for example, being a strong woman who confronts others and speaks her mind may not be seen as desirable.

Question to prompt discussion:

- *How do you think participants will feel talking about self-esteem and its effect on their relationships?*

Possible responses:

- I think the cultural and gender-specific values we just discussed may make it hard for some participants to buy into our definitions of women with high self-esteem.
- Participants may feel that we're blaming them — blaming the victim — if they don't have what we consider healthy relationships.



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

WHAT IS COMMUNICATION?



Discussion



Purpose: To define communication, identify different communication styles, and focus on assertive communication



Needed Equipment, Supplies, and Materials: Slides 7–11



Time: 35 minutes

The discussion helps participants define communication and understand that there are different communication styles.

Now we're going to discuss a topic that is the subject of hundreds of books, classes, and other discussion groups; but we need to be brief. The topic is communication.

Question to prompt discussion:

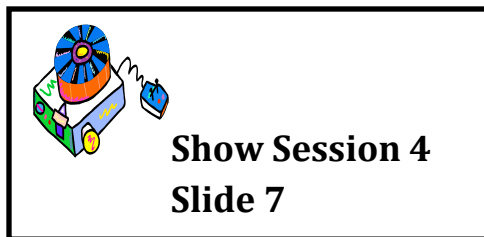
- *What's your definition of communication?*

Possible responses:

- Talking to another person

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- Being honest in what you say
- Listening when someone else is talking
- Facial expressions — a dirty look
- Body language — arms crossed, looking disgusted



What Is Communication?

- Communication is the exchange of information, ideas, and feelings.
- Communication requires that someone else understands what you mean.
- We are always communicating. Communication starts as soon as we are born.
- Communication can be verbal or non-verbal.



SEPA Session 4: Ways To Improve Communication With Our Partners

Communication is the exchange of information, ideas, and feelings.

Communication requires that someone else understands what you mean.

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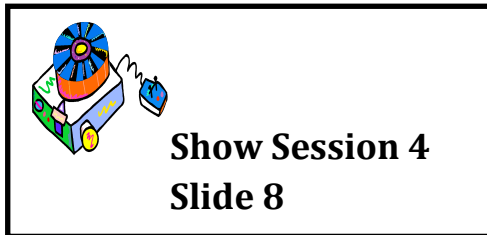
Communication can be verbal or non-verbal.

Communication Styles

Healthy relationships depend on good communication between partners. The following discussion focuses on communication styles that are likely to promote negative responses. These communication styles are highlighted to

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help participants understand the differences between good and poor communication. Assertive communication, which is likely to promote positive responses, is described later in the session.



Just as there are different languages, such as Spanish, English, and French, there are different styles of verbal communication. These include assertive, aggressive, passive, and passive-aggressive.

Some types of verbal communication promote positive responses from other people, whereas other types tend to promote negative responses. Aggressive, passive, and passive-aggressive communication styles are more likely to bring about negative responses. Let's briefly discuss each of these styles of communication before we focus on assertive communication, which is a type of communication that can lead to healthier relationships.

Aggressive Communication

Question to prompt discussion:

- *What is aggressive communication? Can anyone provide an example of aggressive communication?*

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Possible responses:

- When you're angry and talk in an angry or mean way.
- When you yell at someone.
- When you say something demanding, like, for example, "Get out of my sight!"

Aggressive people tend to fight, accuse, and threaten others. Individuals who communicate aggressively speak in an argumentative way and do not care about hurting the other person's feelings. The aggressive person tries to get what he or she wants regardless of the needs and desires of others.

In a couple where one of the persons communicates aggressively, the other person may be afraid to express his or her thoughts and feelings. Being an aggressive communicator means that you usually get your way because most people are afraid to disagree with you.

Passive Communication

Question to prompt discussion:

- *What is passive communication? What's an example of passive communication?*

Possible responses:

- When you don't speak up
- When you say, "whatever"

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An advantage of being a passive communicator is not being rejected by others. People who are passive give in. As long as the passive person doesn't argue her opinion, her partner can do what he wants. For example, the male says what must be done and makes the decisions and the woman agrees to everything regardless of her opinion. Unfortunately, passive communicators are frequently taken advantage of and rarely feel comfortable objecting to their partner's decisions or demands. By not feeling heard, passive communicators may feel resentment and irritation toward their partners.

Passive-Aggressive Communication

You may have heard of passive-aggressive people. What is passive-aggressive communication?

Allow participants to brainstorm.

Passive-aggressive communication is a style where people appear passive on the surface, but are angry and hurt on the inside. Instead of being honest and communicating their feelings in a positive way, they don't really say what's on their minds. Instead, they avoid the issue — they beat around the bush.

Question to prompt discussion:

- *Who can provide an example of passive-aggressive communication?*

Possible responses:

- You know I love you and want you to do whatever makes you happy.
- I don't really care; you can do whatever you want.

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Question to prompt discussion:

- *Let's use the situation of a woman being upset over her boyfriend's smoking to show these different types of communication. Who can give an example of aggressive communication by this woman?*

Possible responses:

- You are making me sick. How many times do I have to tell you that you better stop smoking?
- I've told you a million times that you have to stop smoking. You better stop smoking by tomorrow.

Question to prompt discussion:

- *Who can give examples of passive communication?*

Possible responses:

- I saw a news report on TV saying that second-hand smoke is bad for the health of people around smokers. Did you know that?
- Do you know that most of the restaurants in town don't allow smoking because it bothers so many people and can cause health problems for the people who work in the restaurant?

Question to prompt discussion:

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- *Our last type of communication is passive-aggressive communication. Using the smoking situation, who has an example of passive-aggressive communication?*

Possible responses:

- Don't you think that if a man really cares for his girlfriend, he wouldn't endanger her health and his own health by smoking?
- I've been coughing a lot lately. Do you think it has anything to do with your smoking?

Question to prompt discussion:

- *Think about the discussion we just had on self-esteem. Do you think people — both men and women — who have high self-esteem communicate aggressively?*

Possible responses:

- Yes — when they're angry.
- Probably not because they wouldn't want to hurt another person's feelings.

Question to prompt discussion:

- *Do you think they communicate passively or in passive-aggressive ways?*

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Possible responses:

- Yes. You can have high self-esteem but you still have feelings — you can be mean and sarcastic.
- I don't think so because if you have good self-esteem you can be honest with other people and not worry about what they think of you.

Thank you. That was a great discussion.

Assertive Communication

Assertive communication is likely to promote positive responses from others. Being assertive is a necessary skill for negotiating condom use. During this part of the session, participants will learn about assertive communication.

Now we will focus on assertive communication. An assertive response is upfront and honest and is communicated by self-assured and confident individuals. Think about our discussion about women with high self-esteem. Do you think that women with high self-esteem have the ability to communicate assertively?

Assertive persons express their opinions and desires without hurting others. A person who is assertive listens to what the other person has to say and considers that person's opinions. Even though the assertive person may not agree with the other person's points of view, she responds in a calm, firm, and self-assured manner. Thus, the assertive person is able to respond to the other person without being aggressive or threatening.

Assertive people often get what they set out to achieve without the other person feeling victimized, cheated, or defrauded. Being assertive is a good way to resolve problems and an important way to communicate with your partner.



Examples of Assertive Phrases

- I think I understand what you mean. Here's what I think.
- There's something I want to talk to you about. Please sit down and listen to what I have to say.
- You seem to be upset and angry. I honestly don't know what's bothering you. Sit down and tell me what's going on.



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Here are some examples of assertive phrases:

- *I think I understand what you mean. Here's what I think.*
- *There's something I want to talk to you about. Please sit down and listen to what I have to say.*
- *You seem to be upset and angry. I honestly don't know what's bothering you. Sit down and tell me what's going on.*


Assertive communication enables you to clearly talk about your point of view without making the other person feel defensive. In a couple's relationship, assertive communication helps to resolve problems in a mutually beneficial manner. In other words, both parties can win.



"I" Statements

- Allow you to express your needs and feelings
- Allow you to be direct and honest without blaming others
- Examples of "I" statements:
 - I feel frustrated when you don't help to discipline the children. I don't like feeling like I'm the bad guy.
 - I feel angry when you make decisions for both of us without discussing these decisions with me. I want to be included in decisions that affect our family and me.
 - I understand that you don't want to visit my family as often as I do; however, being with my family is important to me. Can we work on a compromise?

SEPA Session 4: Ways To Improve Communication With Our Partners



To be assertive, it's important to express your needs and feelings. To do this, use "I" statements. An "I" statement allows you to be direct and honest without blaming others. Here are some examples of "I" statements a woman can use when assertively communicating with her partner:

- I feel frustrated when you don't help to discipline the children. I don't like feeling like I'm the bad guy.*
- I feel angry when you make decisions for both of us without discussing these decisions with me. I want to be included in decisions that affect our family and me.*
- I understand that you don't want to visit my family as often as I do; however, being with my family is important to me. Can we work on a compromise?*



Show Session 4 Slide 11

Tips for Effective Communication

- Maintain eye contact while expressing your ideas.
- Keep an appropriate distance from the other person.
- Let the other person talk and don't cut him or her off.
- Don't finish other peoples' sentences.
- Respect the other person's turn to speak.
- Listen to what the other person has to say.
- Don't be afraid to express your feelings.



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Women who use assertive communication can communicate effectively. Use the following tips for effective communication with friends, family, and your partner.

- *Maintain eye contact with the other person while expressing your ideas.*
- *Keep an appropriate distance from the other person.*
If you are too far away, you may appear disinterested and you may need to raise your voice, which could make you seem angry and argumentative. If you are too close, the other person can feel intimidated and think his or her personal space has been invaded.
- *Let the other person talk and don't cut him or her off.*
When the other person finishes, wait a couple of seconds to make sure he doesn't have anything else to say.
- *Don't finish other peoples' sentences.*
Don't interrupt and say what you think they are going to say.
- *Respect the other person's turn to speak.*
A monologue is not communication.
- *Listen to what the other person has to say.*
Sincerely listen to the other person and don't plan what you want to say next.

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- *Don't be afraid to express your feelings.*
It's important for people to express their feelings. When we communicate at the feeling level, it's possible to eliminate much of the misunderstanding in relationships.

Practicing Assertive Communication Skills



Role-Play



Purpose: To practice assertive communication skills



Needed Equipment, Supplies, and Materials: Participant Workbooks, role-play scenarios, hat or bowl

The following role-play will help participants practice assertive communication.

Instruct participants to pick a partner and an assignment from a hat or bowl in order to conduct role-play. Tell participants that the goal of the role-play is to respond assertively. Ask them to practice the role-plays with their partners. Once all participants have had time to practice, the pairs will perform their role-plays in front of the group. Participants who are watching the role-play should provide feedback about the assertive responses. If the response was not assertive, ask participants to create an assertive response and repeat the role-play.

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Next we are going to practice assertive communication using a role-playing exercise. Please partner with someone in the group.

Look at “Session 4, Worksheet 2: Assertive Responses Scenarios” in your workbook. Each pair will have a scenario to role-play. To make this fair, pick a paper out of this hat. The paper has a number on it for your role-play. Refer to the worksheet for your role-play. After you practice, each pair will act out its scenario for the group.



Facilitator's Note:

There may not be a role-play for each pair. You may write your own or some pairs may duplicate a scenario.

Ask pairs to role-play their scenarios. When they finish, both the facilitator and group members should provide feedback.

Questions to prompt discussion:

- *How does it feel to communicate assertively?*
- *Was it hard to be assertive? If yes, what was difficult?*

Possible responses:

- It wasn't too hard here but it will be hard in real life.
- I felt like I had to restrain myself from saying what I really thought.

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When you use “I” statements, it’s easier to express your feelings, which could help your partner express how he feels and help you understand him better.



Facilitator’s Note:

At this point, you should be halfway through implementation of Session 4.

We are about halfway through Session 4. Are there any questions or comments?



IT’S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD “STOP” FACING EVERYONE.

Ask facilitators to identify challenges in discussing assertiveness with Latinas. Discuss how cultural and gender-specific values such as Machismo and Marianismo may make assertiveness training difficult. Inform facilitators that participants are interested in concrete examples of how being assertive can be mutually beneficial in a couple’s relationship.

Question to prompt discussion:

- *How do you think actual participants will feel about this role-play exercise?*

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Possible responses:

- SEPA participants will have fun with the role-play.
- Some participants may feel insecure because it's hard for them to be assertive in real life.

Question to prompt discussion:

- *In what ways can you make the point that cultural and gender-specific values may affect the ways Latinos communicate?*

Possible responses:

- When I ask if it was difficult to be assertive, I might ask if cultural issues make assertive communication difficult for Latinas.
- We can ask if participants think all women communicate the same way.



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

CONDOM NEGOTIATION



Discussion



Purpose: To discuss condom negotiation and identify why it may be hard to talk about condom use with a partner or husband



Needed Equipment, Supplies, and Materials: Slides 12–13, newsprint, markers



Time: 10 minutes

Discuss condom negotiation in the context of healthy relationships. Emphasize that partners in healthy relationships can openly discuss difficult topics such as condom negotiation.

We have discussed many topics during this session. We've talked about self-esteem and how women with high self-esteem respect themselves, their bodies, and their health. We've talked about how self-esteem influences relationships. Women with high self-esteem insist on healthy relationships with their partners. In healthy relationships, men and women are able to communicate about difficult topics, including sexuality and sex. One way to have an effective conversation about difficult topics is to use assertive communication. Now we know that this means you express how you feel and what you want in ways that are respectful of how your partner feels. You have done a great job practicing assertive communication.

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During Session 3, we learned about condoms and how to use both the female and male condom as protection against HIV and other sexually transmitted diseases.

Even though women may know how important it is to use condoms, many find it difficult to talk with their sex partners about using condoms for STD and HIV prevention. This is understandable. To help make this discussion easier, we're going to learn more about assertive communication and practice condom-negotiation skills. Condom negotiation is the term we use for having a two-way conversation with a sex partner about using condoms.

First, let's talk about difficult conversations.

Questions to prompt discussion:

- Are there topics that you avoid discussing with your partner? If you don't currently have a partner, think about a past relationship.*
- Why do you think it is difficult to discuss these topics?*

Possible responses:

- I don't talk too much to my men about my family because there's a history of domestic violence and it's embarrassing.
- If my boyfriend brings up how much money I spend on clothes and shoes, I won't talk to him about it because it's none of his business.
- I don't talk about how many boyfriends I've had; it's something from the past.

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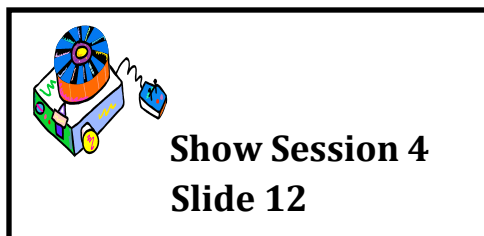
Question to prompt discussion:

- *Why do you think it can be hard to start a conversation with your partner about HIV prevention and the need to use condoms for safer sex?*

Write comments on the newsprint.

Possible responses:

- He could think I sleep around.
- He'll think I have an STD.
- We could get into a fight because he could think I don't trust him.



Discussing Condoms with Sex Partners

It's difficult to discuss condoms because:

- My partner may think I don't trust him.
- My partner may think I have an STD or HIV.
- My partner may think I'm bossing him around.
- It's an uncomfortable topic to talk about.
- My partner may leave me.



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Some people's responses to this question could sound like this:

It may be difficult to discuss condoms with sex partners because:

- *My partner may think I don't trust him.*
- *My partner may think I have an STD or HIV.*

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- *My partner may think I'm bossing him around.*
- *It's an uncomfortable topic to talk about.*
- *My partner may leave me.*

Remember how we said assertive communication can help in difficult situations? Using assertive communication will help you talk about condoms whether you're talking to a long-time partner or with a man you've recently started seeing.



**Assertive Communication
about Condoms**

Examples of assertive communication about condoms with a new boyfriend:

- I believe having sex is a big decision and something we should talk about.
- I think unprotected sex can be a serious threat to our health.
- I don't want to get an STD and I worry about AIDS; that's why we need to talk.
- I have a policy of always using condoms until I know whether my partner has HIV or an STD.



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Discussing condoms with a new boyfriend may be difficult at first, but it's very important. Here are some examples of assertive communication that you can use.

- *I believe having sex is a big decision and something we should talk about.*
- *I think unprotected sex can be a serious threat to our health.*
- *I don't want to get an STD and I worry about AIDS; that's why we need to talk.*

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- *I have a policy of always using condoms until I know whether my partner has HIV or an STD.*

Many people believe myths about condoms or think that using a condom means that partners don't trust each other. Condom use is about taking responsibility for yourself and your partner.

Question to prompt discussion:

- *Who wants to share an experience of talking to a partner about condoms?*

HOW TO BEGIN A CONVERSATION ABOUT CONDOM USE



Discussion



Purpose: To discuss strategies for beginning condom negotiation



Needed Equipment, Supplies, and Materials: Slide 14, newsprint, markers



Time: 10 minutes

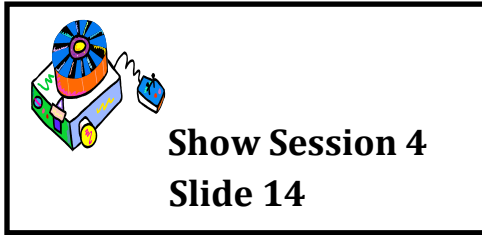
Starting a conversation about condom use is an important skill for all women to have. Participants should brainstorm about when they should bring up the subject of condom use. Write ideas on the newsprint.

Question to prompt discussion:

- *When should a woman bring up the subject of condom use with her sex partner?*

Possible responses:

- When they walk to the bedroom
- When they're kissing



Tips for Discussing Condoms

- Bring up the discussion before you have sex.
- When talking to your partner, use “I” statements.
- Always give reasons for wanting to use a condom; address your partner’s reasons for not wanting to.
- Emphasize the positive aspects of your relationship and the importance of protecting each other’s health.
- Tell your partner it will be fun to make condoms sexy and exciting.



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Here are some tips for discussing condoms:

- *Bring up the discussion before you have sex. Don't wait until the heat of the moment.*
- *When talking to your partner, use “I” statements. You can refer back to the examples of assertive communication for talking about condoms with a new boyfriend.*
- *Always provide your reasons for wanting to use a condom. Listen to your partner’s response and address his reasons for not wanting to use one if he objects.*
- *Emphasize the positive aspects of your relationship and the importance of protecting each other’s health.*
- *Tell your partner it will be fun to make condoms sexy and exciting. For example, putting the condom on and using lubricant can be stimulating and part of foreplay. Trying different types of condoms, such as textured, glow-in-the-dark, and flavored condoms, can be sexy. You can even learn how to put a condom on your partner with your mouth.*

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Question to prompt discussion:

- *What other strategies can make condoms sexy?*

Possible responses:

- Touch your partner while you put the condom on him.
- Kiss him while you put the condom on him.
- Tell him you want to try every kind of condom, so there will be a lot of sex in store for both of you.
- I can wear a female condom or you can wear a male condom. They even come in different sizes and colors. What do you think?



Facilitator's Note:

Participants in long-term relationships who haven't used condoms with their partners may ask for examples of ways to discuss condoms without creating potential problems in their relationships. If this happens, ask participants for their ideas and consider the following examples.

- I know we haven't used condoms in the past, but I want to do something new until we both get tested for HIV, let's try condoms.
- I've been thinking about health issues, like HIV and STDs. I would feel much more comfortable if we both got tested and used condoms until we get the results.

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IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

Questions to prompt discussion:

- *What do you think about the material on condom negotiation?*
- *How do you think SEPA participants will react to it?*
- *What techniques will you use to keep participants engaged in discussion?*

Possible responses:

- I will ask participants by name, "What do you think about this?"
- I will ask who has had sex with partners who use condoms and if any of the women asked their partners first or if their partners already had the condoms.
- It might be a good idea to ask the women if they have sexually active sons and if their sons use condoms.



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

PRACTICING CONDOM NEGOTIATION, PART 1



Group Activity



Purpose: To identify strategies and practice skills for negotiating condom use



Needed Equipment, Supplies, and Materials: Participant Workbooks



Time: 15 minutes

During this activity, participants will practice negotiating condom use.

What do you do if your partner doesn't want to use a condom? Think about the communication lessons you learned today. Remember: It's your responsibility to educate your partner about the importance of preventing HIV and STDs.

We are going to have a small group activity that should be a lot of fun and a good learning experience. Divide into groups that have at least three but no more than five participants. Turn to the "Session 4, Worksheet 3: My Partner Doesn't Want to Use a Condom" in your workbooks.

This worksheet lists statements that your partner or boyfriend might make if he doesn't want to use a condom after you explain that it's important to you. In your groups, come up with a response using assertive communication. Let's discuss an example.

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Question to prompt discussion:

- *You ask him to use a condom and he says that he loves you and is having sex with no one else but you. How can you respond using assertive communication and “I” statements?*

Possible responses:

- I love you too. Using a condom will protect our health so we can continue to love each other for a long time to come. People who love each other want to protect each other.
- I am so happy to hear you say that you’re having sex with only me, and know that I’m having sex with only you. But I bet I’m not the only woman you’ve ever slept with. Let’s use condoms until we get tested for HIV and know for sure that we are safe.

After each group has completed the activity, we will discuss your responses in the larger group.

Assign each group a situation, or let the groups choose a situation. After about five minutes, ask each group to go through their responses using assertive communication. Ask other participants for their comments.

Question to prompt discussion:

- *Was it hard to think of an assertive response? If yes, why? If no, why not?*

Possible responses:

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- It wasn't too hard to think of something because of what we've learned in SEPA.
- In real life it will probably be more difficult than here where it's not a real situation.



Facilitator's Note:

Acknowledge that real-life situations will be more difficult than the group activities in SEPA. Point out that is why we practice condom negotiation. Note that it take thought and practice in order to feel comfortable and confident communicating with partners at the right time about being safe and protecting each other.

Questions to prompt discussion:

- *What other reactions may your boyfriend or husband have when asked to use a condom? How would you respond?*

Possible responses:

- He may say the topic makes him lose his desire. I would talk about how condoms can be sexy.
- He could say he doesn't have any condoms, but then I'll get mine from the night table.
- He might say he doesn't know how to wear them and I'll show him how in an erotic way.

LUNCH

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IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

This afternoon we will complete session 4 and move on to session 5. How is everyone doing?



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

PRACTICING CONDOM NEGOTIATION, PART 2



Role-Play



Purpose: To practice condom-negotiation skills



Needed Equipment, Supplies, and Materials: Participant Workbooks



Time: 15 minutes

Being able to negotiate condom use takes a lot of practice. The following role-play scenarios will help participants practice their newly learned condom negotiation skills.

I hope you enjoyed that group activity.

We're going to continue to practice condom negotiation. Please partner with someone in the group. Look at "Session 4, Worksheet 4: Condom-Negotiation Scenarios" in your workbooks. Choose a scenario to role-play with your partner. The goal is to negotiate condom use. One person will play the role of the man who doesn't want to use a condom and the other will play the role of the woman who does. Do your best to use assertive communication and "I" statements. Each pair will have time to practice and then each of you will act out the scenarios for the larger group.

Let me make sure each scenario is covered. Who is doing #1?

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Check that all three scenarios will be used.

After about five minutes, ask each pair to demonstrate their scenario.

After each role-play, ask the group for comments.

Question to prompt discussion:

- *These were role-plays and you did an excellent job. But what about real life? What have you learned so far that will help you them most with talking to your sex partner about using condoms?*

Possible responses:

- Using “I” statements and being honest about how I feel seems best.
- Knowing that condoms can prevent infection and serious illness is all I need.
- Having condoms available and putting them on him in a sexy way is the strategy I like.
- I like to think of myself as a woman with good self-esteem and that will help me if I get nervous talking about condoms.
- We keep forgetting about female condoms. I want to try them and then I don’t have to worry about saying anything to my date.

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WRAP-UP ACTIVITIES



Time: 10 minutes

Review key messages, assign homework, and provide time for session evaluations.

We're just about finished for today. Let's summarize the main ideas we discussed today. If you have any doubts or questions, this is the time to talk about them.



Review

Refer to “Session 4, Worksheet 5: Session 4 Key Messages” in the workbooks.



Facilitator's Note:

If you think participants will be comfortable, ask for volunteers to read the messages.



**Show Session 4
Slide 15**

Session 4 Key Messages

- Couples in healthy relationships respect and trust each other and communicate about important topics, like protecting their health and not getting STDs and HIV.
- When you use assertive communication, you listen to the other person and respond in a confident way to express how you feel and what you think.
- When you make the decision to use condoms and when you use assertive communication, condom negotiation will be much easier.



SEPA Session 4: Ways To Improve Communication With Our Partners

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Couples in healthy relationships respect and trust each other and communicate about important topics, like protecting their health and not getting STDs and HIV.

When you use assertive communication, you listen to the other person and respond in a confident way to express how you feel and what you think.

There are many reasons to talk to your partners about condoms. When you make the decision to use condoms and when you use assertive communication, condom negotiation will be much easier.

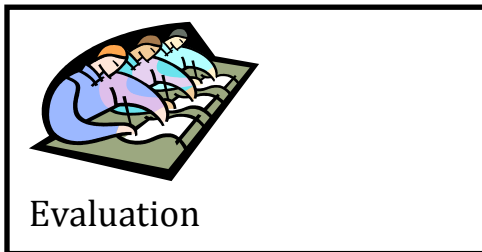


Homework

Refer participants to the “Session 4, Worksheet 6: Homework – Practicing Assertive Communication” in their workbooks.

Your fourth homework assignment is to practice using assertive communication with a friend, family member, partner, or neighbor. Any topic will do. For example, you can talk to a girlfriend about something that’s bothering you about your relationship with her or you could talk to a neighbor about something they do that’s annoying you. Come prepared to discuss what happened during the next session.

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Ask participants to fill out the “Session 4, Worksheet 7: Session 4 Evaluation” in their workbooks.

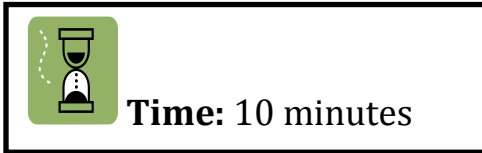
Before we leave, please complete the evaluation sheets. When you are finished, tear the sheets out of your workbook and place them on the table. I will review them and see where improvements are needed.

Thank you and I look forward to seeing you at our next session, which is [date/day/time]. We will discuss the very important topic of domestic violence. If you know any of the participants who weren't here today, please encourage them to attend next week's session.



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD “STOP” FACING EVERYONE.

FACILITATOR FEEDBACK



Initiate a feedback discussion with facilitators about the session. Ask facilitators to describe how the session felt and what concerns they may have about implementing the session with SEPA participants. Answer all facilitators' questions about the session.

Let's move on to session 5. This session deals with issues that may be emotionally charged for some SEPA participants as well as some facilitators. Please ask questions and let me know how the training is going as we proceed with session 5 on relationship violence.

SESSION 5: RELATIONSHIP VIOLENCE, HIV RISK, AND SAFETY MEASURES

Introduction



Purpose: To introduce Session 5 and its materials and core elements



Time: 5 minutes

The goal of Session 5 is to discuss relationship violence, including domestic violence and intimate partner violence. We will discuss how domestic violence affects women and families and explore strategies to keep safe. Throughout the session we identify the relationship between violence and HIV and STD risk.

Please open the Facilitators Guide to the beginning of Session 5. As usual, we see the overview and a list of needed materials:

- ☐ *Facilitators Guide*
- ☐ *Participant Workbooks*
- ☐ *CD of Session 5 PowerPoint slides*
- ☐ *LCD projector*
- ☐ *Laptop computer*
- ☐ *Screen*
- ☐ *Podium*
- ☐ *Newsprint*
- ☐ *Easel stand*

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- ☐ *Paper*
- ☐ *Markers*
- ☐ *Pens and pencils*
- ☐ *Nametags*
- ☐ *Hat or bowl*
- ☐ *Tissues*
- ☐ *Brochures on community resources on domestic violence, mental health, social services, and immigration services, including agencies that serve children*

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Core Elements

CORE ELEMENT	ACTIVITIES
<p>Core Element 1: Provide culturally and linguistically appropriate information to sexually active women at risk of acquiring HIV from unprotected sex with male partners in interactive, small group sessions that focus on</p> <ul style="list-style-type: none"> • HIV and STD transmission and prevention; • human sexuality and male and female anatomy; • interpersonal communications; and • relationship violence. 	<p><u>Discussions</u></p> <ul style="list-style-type: none"> • Conflict resolution in healthy relationships • Relationship violence • Intimate partner violence • Characteristics of the abuser and victim • Impact of violence on families • Safety measures and action planning <p><u>Group Activities</u></p> <ul style="list-style-type: none"> • True-or-false activity on sexual violence • Strategies for dealing with relationship violence
<p>Core Element 2: In addition to presentations and discussion, incorporate skill-building activities to enhance women's self-efficacy for safer sex behaviors, including demonstrations and practice exercises on male and female condom use and role-playing on assertive communication with sex partners, including condom negotiation.</p>	<p><u>Role-Plays</u></p> <ul style="list-style-type: none"> • Dare To Say • Practicing conflict resolution skills
<p>Core Element 3: Build self-efficacy and knowledge for safer sex behaviors, improved communication with partners, and violence management through homework exercises and the sharing of personal experiences.</p>	<p><u>Homework</u></p> <ul style="list-style-type: none"> • Homework review • Homework assignment

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IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

WELCOME PARTICIPANTS



Discussion



Purpose: To welcome participants back, review the key messages from Session 4, review Session 4 homework, and introduce Session 5



Needed Equipment, Supplies, and Materials: Session 5 slides 1–2, Participant Workbooks



Time: 10 minutes

Welcome back! We're already up to Session 5 and next week is our final session. I'm so happy to see you again and I sincerely thank you for taking the time to participate in SEPA.

Today we will discuss a topic that unfortunately affects too many of us. That topic is relationship violence. We will talk about domestic violence, how violence can increase your risk for HIV, and how it affects women and families. We will also explore strategies for escaping violence.

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The success of today's session depends on your participation. We've discussed confidentiality before, but I want to review this critical ground rule again. Everything that is said in this group is to remain in this group. No one should repeat personal information about anyone else in the group, and you must never mention names. I hope that by knowing this you feel more comfortable about sharing experiences so we can learn from each other.

Relationship violence is a difficult topic to talk about. If anyone feels upset during or after our session, let me know.

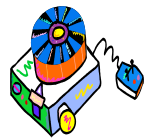


Facilitator's Note:

Discussion of domestic violence and intimate partner violence may disturb some participants. Be prepared to comfort women who become emotional, learn about agencies that serve victims of domestic violence for referrals, and consider distributing brochures or pamphlets on domestic and intimate partner violence. It is possible that some participants may need immediate referral and linkage to services.

Session 4 Review

Before we begin Session 5, let's review what we learned from Session 4. As a reminder, here are the Session 4 key messages.



Show Session 5 Slide 1

Session 4 Key Messages

- Couples in healthy relationships respect and trust each other and communicate about important topics, like protecting their health and not getting STDs and HIV.
- When you use assertive communication, you listen to the other person and respond in a confident way to express how you feel and what you think.
- When you decide to use condoms and when you use assertive communication, condom negotiation will be much easier.

SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

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Couples in healthy relationships respect and trust each other and communicate about important topics, like protecting their health and not getting STDs and HIV.

When you use assertive communication, you listen to the other person and respond in a confident way to express how you feel and what you think.

There are many reasons to talk to your partners about condoms. When you decide to use condoms and when you use assertive communication, condom negotiation will be much easier.

Question to prompt discussion:

- *How can using assertive communication help you in your relationship with your partner or husband?*

Possible responses:

- It can help me be more honest about my feelings and how I think about things.
- I hope it will help me get my partner to sit down and talk to me.

Question to prompt discussion:

- *You ask a new sex partner to wear a condom. He responds, "Real men don't wear condoms." What do you say?*

Possible responses:

- If you want to have a real relationship with me, you need to wear a condom until I know you better.

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- I like you and want to be closer to you, but I have a policy that I always use condoms with a man I'm just getting to know.

Homework Review

Homework reinforces concepts presented during each session. During Session 4, participants were asked to practice assertive communication on any topic with a friend, family member, partner, or community member.

Let's spend a few minutes talking about your homework assignment.

Questions to prompt discussion:

- *Who did you talk to and how did that person respond?*
- *Did you find using assertive communication helpful?*
- *Did you find it difficult to use assertive communication?*

Possible responses:

- I was a little nervous to talk my girlfriend about something that's been on my mind, but I did it by saying how I felt.
- The most helpful part is using "I" statements and focusing on my feelings.

After reviewing the homework assignment, answer any questions participants may have.

Do you have questions or anything you want to bring up about using assertive communication?

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Facilitator's Note:

Thank participants for completing their homework and sharing with the group.

Session Objectives



Show Session 5 Slide 2

Session 5 Objectives

By the time we finish today, you will be able to:

- Explain the relationship between intimate partner violence and a woman's risk for HIV
- Describe how violence affects families, women, and children
- Identify at least three strategies that women can use to help them remain safe if they are in a violent relationship



SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

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Here are today's objectives. By the time we finish this session, you will be able to:

- *Explain the relationship between intimate partner violence and a woman's risk for HIV*
- *Describe how violence affects families, women, and children*
- *Identify at least three strategies that women can use to help them remain safe if they are in a violent relationship*

During the previous session, we talked about different communication styles used by couples and focused on assertive communication. During today's session, we will continue to practice assertive skills. We will also talk about domestic violence and how it affects the family. In addition, you'll learn about strategies that are often recommended to escape from domestic violence situations.

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We'll begin with a role-playing exercise that should be a lot of fun.

DARE TO SAY



Role-Play



Purpose: To practice assertive communication skills



Needed Equipment, Supplies, and Materials: Participant Workbooks



Time: 15 minutes

The following role-play allows participants to practice their newly learned assertive communication skills.

Ask participants to turn to “Session 5, Worksheet 1: Dare To Say” in the workbook and read the instructions.

Think of something that you would like to say to your husband or partner but have never had the courage to say. If you are not currently married or in a relationship, think of a previous partner. Write what you would like to say in two or three sentences. Then, pick another participant to pretend to be your partner. Practice telling your partner what you wrote. Then, switch roles so each of you can practice assertive communication.

Question to prompt discussion:

- *Before you start, who can review strategies for assertive communication?*

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Possible responses:

- Use “I” statements.
- Say how you feel.
- Express your emotions.
- Let the other person talk.
- Listen to the other person.

Question to prompt discussion:

- *How do you think communicating assertively with your husband or partner might affect your relationship?*

Possible responses:

- I hope it will make it better. Like we said before, we can talk more honestly to each other.
- In the beginning he might get mad, but I’ll tell him he has to get used to it.

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IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

Do you have any comments about the Dare to Say exercise? How do you think actual participants will react to it?



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

CONFLICT RESOLUTION IN HEALTHY RELATIONSHIPS



Discussion



Purpose: To discuss conflict resolution and its importance for a healthy relationship



Needed Equipment, Supplies, and Materials: Slide 3



Time: 10 minutes

Introduce the concept of conflict and its importance for healthy relationships. Explain that assertive communication is a good strategy to resolve conflicts in a healthy, non-violent relationship. Reinforce that if a person is in a relationship where he or she is at risk for violence, assertive communication strategies will not keep the person safe. Inform participants that we will discuss relationship violence and strategies to maintain a person's safety later in the session.

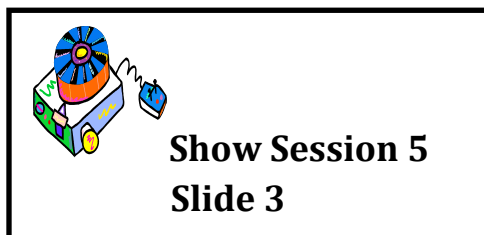
Let's talk about healthy relationships and how to resolve conflicts. Remember, conflict is a part of life and it occurs in every relationship, including family relationships and relationships with friends. Conflict is not necessarily bad. For many couples, conflicts can strengthen relationships by providing the opportunity to learn more about and understand each other. It is not the number of conflicts that is critical to determine whether a relationship is healthy but how those conflicts are resolved.

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Conflicts that are not resolved successfully can grow into arguments that can get ugly and sometimes become violent. These arguments may threaten your safety, particularly if you are in an abusive relationship. Although assertive communication may reduce conflict between two persons, it probably will not lessen violence in an abusive relationship.

When a conflict occurs in a relationship, both partners should try to resolve the conflict. Remember: Conflict occurs because each person has a different perspective on the situation.

We have talked about healthy relationships being based on open and assertive communication where each partner can speak comfortably and honestly. When couples in healthy relationships have conflicts and choose to avoid communication, those couples are at risk for relationship problems.



Techniques to Help Resolve Conflicts between Couples

- **Stop:** When you feel yourself getting angry and about to say something you will regret, stop the argument.
- **Assert:** Use “I” statements to explain to your partner how you are feeling, what the problem is, how his behavior affects your feelings, and what you would like to happen.
- **Listen:** Remember that being assertive also means that you listen to your partner’s thoughts and feelings.
- **Resolve:** Think of solutions that satisfy both of you. Sometimes this requires compromise.



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Here are some techniques that may help you resolve conflicts with a partner when a conversation turns into an argument.

- *Stop. When you feel that you are getting angry and about to say something you will regret, stop the argument. Tell your partner that you need a time out or need to take a deep breath.*

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- *Assert. Use “I” statements to explain how you are feeling, what the problem is, how his behavior affects your feelings, and what you would like to happen.*
- *Listen. Remember that being assertive also means that you listen to your partner’s thoughts and feelings.*
- *Resolve. Think of solutions that satisfy both of you. Sometimes this requires compromise.*

Question to prompt discussion:

- *Can anyone share examples of conflicts from current or past relationships? How have you resolved these conflicts?*

Possible responses:

- We broke up.
- We had a big fight but then we worked it out.
- I made him sit down and talk to me.

PRACTICING CONFLICT RESOLUTION SKILLS



Role-Play



Purpose: To practice conflict resolution skills



Needed Equipment, Supplies, and Materials: Participant Workbooks



Time: 10 minutes

Learning how to resolve conflicts takes practice. The following role-play will help participants develop conflict resolution skills.

Let's practice resolving conflicts. Pick a partner and select one of the situations from "Session 5, Worksheet 2: Conflict Resolution Scenarios" in your workbooks. Begin with a small argument and then practice strategies to resolve the conflict. Both of you need to practice conflict resolution.

After participants have practiced, ask for volunteers to demonstrate and then to discuss whether the conflict resolution techniques they used would be helpful in their relationships.

Questions to prompt discussion:

- *Who would like to show us your conflict resolution skills?*

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- *How does using conflict resolution skills feel?*

Possible responses:

- I was so angry, I had to calm down and then use “I” statements.
- I didn’t want to compromise, but I did.
- When I listened to his side of the story, I felt a little better.

Question to prompt discussion:

- *How do you think conflict resolution skills can help you in current or future relationships?*

Possible responses:

- They can help prevent a big fight.
- I think they can help me stay calm when I get very angry.
- They will help me to remember that I have to compromise.



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD “STOP” FACING EVERYONE.

How many of you have worked with women who have experienced intimate partner violence? Can you share your experiences in working with these women?

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Allow facilitators to share their experiences and what they have learned. Inform facilitators of your experiences in working with women who have experienced intimate partner violence.

Intimate partner violence affects too many women. Although intimate partner violence among racial and ethnic minorities is not well documented, some studies suggest that immigrant women are more vulnerable to abuse,¹ and that Latinas suffer more severe mental health problems from intimate partner violence than non-Latinas.²

Intimate partner violence affects self-esteem and a woman's ability to communicate with her partner. The relationship between intimate partner violence and HIV risk among women throughout the world has been documented.³ Women in violent relationships are at risk for HIV due to their inability to negotiate intercourse and condom usage, and due to the physical consequences of sexual violence.

The rest of Session 5 is dedicated to talking about intimate partner violence and providing women with strategies to maintain their safety. Does anyone foresee any challenges in conducting this discussion?



Trainer's Note:

You might want to read "An Overview of Intimate Partner Violence Among Latinos" by Joanne Klevens, at:
<http://vaw.sagepub.com/cgi/content/abstract/13/2/111>.

¹ Raj, A., & Silverman, J. (2002) Violence against immigrant women. *Violence Against Women*, 8(3), 367-398. doi: 10.1177/10778010222183107

² Bonomi, A. E., Anderson, M. L., et al. (2009). Intimate partner violence in Latina and non-Latina women. *American Journal of Preventive Medicine*, 36(1), 43-48.

³ The Global Coalition on Women and AIDS, World Health Organization (2004). Intimate partner violence and HIV/AIDS. *Violence Against Women and HIV/AIDS: Critical Intersections*. Information Bulletin Series, No 1. Geneva: World Health Organization.

BREAK

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IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

RELATIONSHIP VIOLENCE



Discussion and Group Activity



Purpose: To identify the different types of relationship violence, to learn the facts about sexual violence, and to learn about the relationship between partner violence and HIV



Needed Equipment, Supplies, and Materials: Slides 4–10



Time: 25 minutes

Sometimes our best conflict resolution skills will not prevent violence in personal relationships. Let's turn to issues in relationship violence, including domestic and intimate partner violence.

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Facilitator's Note:

Be prepared to make referrals as needed and respond to participants who appear to be upset by the conversation. You might want to read “An Overview of Intimate Partner Violence Among Latinos” by Joanne Klevens, at: <http://vaw.sagepub.com/cgi/content/abstract/13/2/111>. You may also want to make connections with local agencies that address domestic violence prior to this session to help facilitate referrals if needed.

Question to prompt discussion:

- *How do you define intimate partner violence?*

Possible responses:

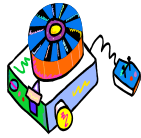
- When your boyfriend hits you.
- When your boyfriend or husband pushes you around.

Question to prompt discussion:

- *What is the difference between intimate partner violence and domestic violence?*

Possible response:

- I think domestic violence can come from people other than your boyfriend or partner.



Show Session 5 Slide 4

What Is Relationship Violence?

- An intentional pattern of threatening behaviors that may include physical, emotional, economic, and sexual abuse
- Types of violence and abuse include:
 - Domestic violence
 - Intimate partner violence
 - Emotional abuse
 - Economic abuse
 - Sexual violence

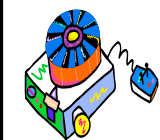


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In SEPA, we define relationship violence as an intentional pattern of threatening behaviors that may include physical, emotional, economic, and sexual abuse. Types of violence and abuse include:

- *Domestic violence*
- *Intimate partner violence*
- *Emotional abuse*
- *Economic abuse*
- *Sexual violence*



Show Session 5 Slide 5

Types of Abuse

Domestic violence

- Takes place between members of a family
- Includes threats, physical abuse, and attacks against property
- Includes emotional abuse, economic abuse, and sexual violence

Intimate partner violence

- Takes place between persons in a current or former sexual relationship
- Includes threats, physical abuse, and attacks against property
- Includes emotional abuse, economic abuse, and sexual violence



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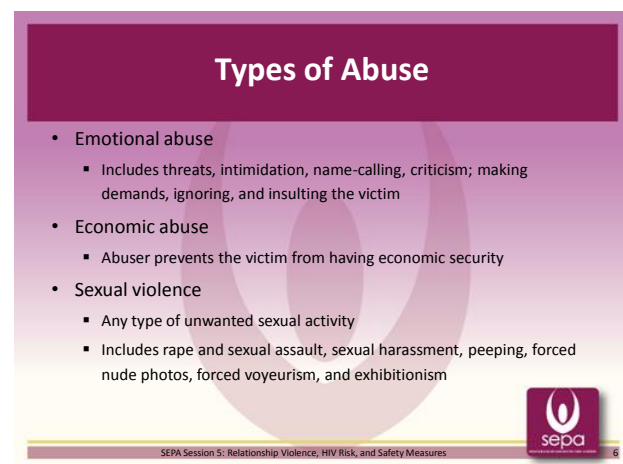
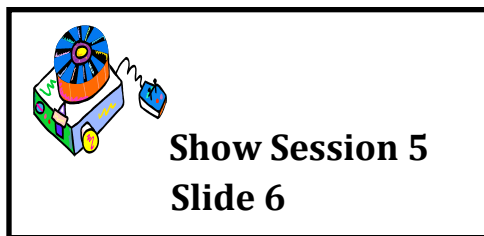
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Domestic violence takes place between members of a family.

Domestic violence includes threats of violence and physical harm, as well as actual physical harm and attacks against property and pets. Domestic violence can also include the emotional abuse, economic abuse, and sexual violence found in intimate partner violence.

Intimate partner violence is abuse that takes place between two people in a sexual relationship. It includes physical abuse, threats of abuse, sexual violence, and emotional and economic abuse. The term “intimate partner” includes current and former husbands and boyfriends.



Emotional or psychological abuse can be as painful as or even more painful than physical abuse. Examples of emotional abuse include ridicule, threats, intimidation, and name-calling. The abuser is critical, insulting, argumentative, and demanding and may ignore or isolate his victims.

Economic abuse occurs when the abuser prevents the victim from having economic security and the ability to take care of herself or himself. For example, an abuser may prevent his partner from going to school, getting a job, or having a bank account.

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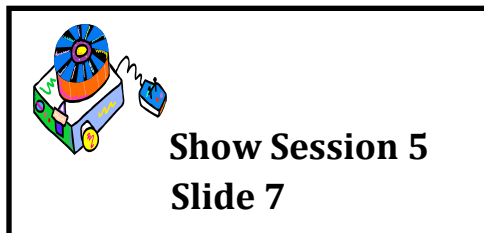
Sexual violence is any type of sexual activity that a person does not agree to have. There are many types of sexual violence — not all include physical contact. Examples of sexual violence are rape, including marital rape; sexual harassment; peeping; taking nude photos; voyeurism (when someone watches private sexual acts); and exhibitionism (when someone exposes herself or himself in public).

Sexual Violence

The following true-or-false activity focuses on sexual violence. A woman's risk of getting infected with HIV increases if she is a victim of sexual violence.

Ask participants to read a statement from the slides, and then ask the group to vote either true or false. Provide the correct answer after each vote.


Let's try another true-and-false activity. This one focuses on what we know, or think we know, about sexual assault.



The Truth about Sexual Violence

- Sexual assault is usually committed by a stranger.
FALSE
- A weapon, such as a gun or a knife, is used in nearly every sexual assault.
FALSE
- Rape occurs because of the violent times in which we live.
FALSE

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Sexual assault is usually committed by a stranger.

Answer: *This is false.*

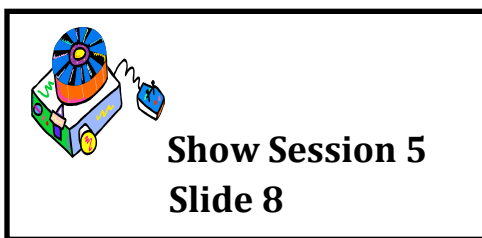
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A weapon, such as a gun or a knife, is used in nearly every sexual assault.

Answer: *This is false.*

Rape occurs because of the violent times in which we live.


Answer: *This is false. Remember that rape is about anger and power, not sex.*



The Truth about Sexual Violence

4. Women can prevent sexual assault by dressing modestly.
FALSE
5. A wife should have sex with her husband whenever he wants, regardless of how she feels.
FALSE
6. Sexual violence is a problem that should be handled by the family.
FALSE

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Women can prevent sexual assault by dressing modestly.

Answer: *This, again, is false.*

A wife should have sex with her husband whenever he wants, regardless of how she feels.

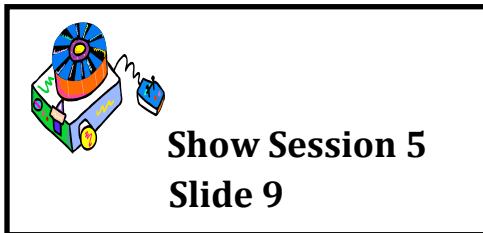
Answer: *False.*

Sexual violence is a problem that should be handled by the family.

Answer: *False. Women who have been sexually assaulted should get support and services from persons and organizations that specialize in*

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sexual violence and assault. Many types of sexual violence are serious crimes.



The Truth about Sexual Violence

7. If your boyfriend buys you something nice, you owe him sex.
FALSE
8. There is no such thing as sexual violence between a husband and wife.
FALSE
9. Sexual assault of a woman by her husband cannot result in an STD.
FALSE

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If your boyfriend buys you something nice, you owe him sex.

Answer: *This is false. You never owe a man sex.*

There is no such thing as sexual violence between a husband and wife.

Answer: *This is false.*

Sexual assault of a woman by her husband cannot result in an STD.

Answer: *False.*

Question to prompt discussion:

- *Does it surprise you to hear so many myths about sexual violence? Why or why not?*

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Possible responses:

- No, because there is a lot of violence in our community.
- No, because Latino men drink and drug too much.

Question to prompt discussion:

- *Do you think that marital rape should be a crime?*

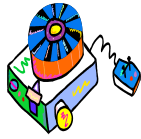
Wait for responses.

Fact: Marital rape is a crime in all 50 states and the District of Columbia.

Why Are We Talking About Sexual Violence in an HIV Prevention Program?

Explain to participants that there is a relationship between HIV risk and sexual violence.

We are discussing sexual violence in SEPA because there is a relationship between sexual violence and a woman's risk of getting infected with HIV.



Show Session 5 Slide 10

Sexual Violence and HIV Risk

- A woman's risk of HIV infection increases when force is used during sex because of physical damage to the vagina.
- The risk of transmission is higher in girls and young women because girls' vaginal tracts tear easily during intercourse.
- Sexual abuse during childhood and forced sex during adolescence are associated with increased HIV risk-taking behaviors among women.
- Childhood sexual assault is associated with low rates of condom use by adults.



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A woman's risk of HIV infection increases when force is used during sex because of physical damage to the vagina.

The risk of transmission is likely to be higher in girls and young women because girls' vaginal tracts tear easily during intercourse.

According to the Global Coalition on Women and AIDS, sexual abuse during childhood and forced sex during adolescence are associated with increased HIV risk-taking behaviors among women.

Childhood sexual assault is associated with low rates of condom use by adults.



Facilitator's Note:

At this point, you should be halfway through implementation of Session 5.

Right now we are about halfway through Session 5. Are there any questions?

Would anyone like to share what you think or feel about the issues we are discussing today?

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IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

The following discussion includes a variety of topics on relationship violence, such as the prevalence of intimate partner violence, the cycle of intimate partner violence, the characteristics of abusers and victims, the relationship between HIV infection and intimate partner violence, and how intimate partner violence impacts the family. Remember that these discussion topics are very sensitive and be ready to hear personal stories of violence. Make sure you have tissues available. If a participant gets upset during a session, talk to her either during the session or after the session. If you think it's necessary, refer her to someone at your agency or another agency.

Are there any comments or questions?



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

INTIMATE PARTNER VIOLENCE



Discussion



Purpose: To discuss intimate partner violence; characteristics of abusers and victims; and how intimate partner violence relates to HIV and its impact on family



Needed Equipment, Supplies, and Materials: Slides 11–17, newsprint, markers

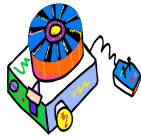


Time: 30 minutes

The goal of this discussion is to highlight the prevalence of intimate partner violence and discuss the cycle of intimate partner violence.

Now we will focus on intimate partner violence and see how it takes place in a cycle that makes it difficult for many women to escape.

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Show Session 5 Slide 11

The Truth about Intimate Partner Violence

- Violent relationships are not healthy relationships.
- 1 in every 4 women in the United States will experience domestic violence during her lifetime.
- An estimated 1.3 million women are victims of physical assault by an intimate partner each year.
- Men can also be victims of intimate partner violence.



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Violent relationships are not healthy relationships.

Unfortunately, many women are the victims of intimate partner violence. According to the National Coalition Against Domestic Violence, one in every four women in the United States will experience domestic violence during her lifetime, and, an estimated 1.3 million women are victims of physical assault by an intimate partner each year.

Men can also be victims of intimate partner violence. However, the vast majority of victims are women.



Show Session 5 Slide 12

The Truth about Intimate Partner Violence

- Women are more likely than men to be stalked by intimate partners.
- In all forms of violence, control is a key issue.
- When a woman is being controlled by an abusive partner, it is extremely difficult for her to protect herself from HIV and STDs.



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Women are more likely than men to be stalked by intimate partners.

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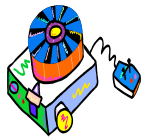
In all forms of violence, control is a key issue. The abuser – often called a batterer -- believes he is entitled to control his victim.

When a woman is being controlled by an abusive partner, it is extremely difficult for her to practice HIV and STD prevention.

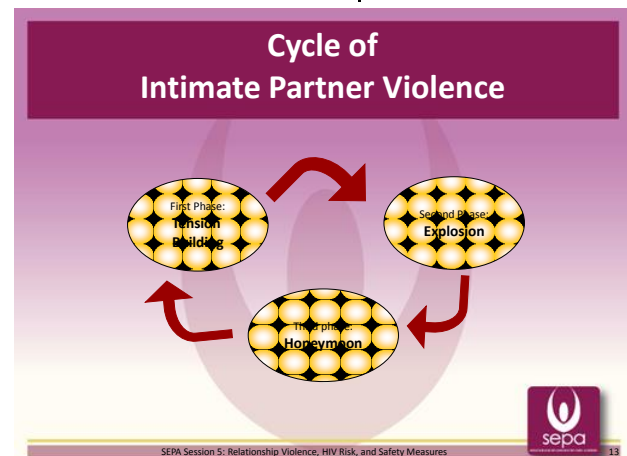


Facilitator's Note:

For more information on domestic and intimate partner violence, see the National Coalition Against Domestic Violence at <http://www.ncadv.org/>, and see the Centers for Disease Control and Prevention National Center for Injury Prevention and Control at <http://www.cdc.gov/ViolencePrevention/intimatepartnerviolence/index.html>.



**Show Session 5
Slide 13**



Intimate partner violence is cyclical. This means that the abuse is repeated and happens in phases. We call the first phase the tension building phase. In this phase, there is an increase in the tension between the partners, with the abuser becoming increasingly controlling. During this phase, the abuse is subtle and psychological abuse, such as ridicule, intimidation, and isolation, tends to occur.

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This phase may last for days or even months. Examples of what can happen with the abuser include:

- *The abuser shows a mixture of controlling behaviors, such as jealousy and emotional abuse, along with good days of being an attentive, loving partner.*
- *The abuser may start arguments about such matters as the children, pets, and money.*
- *He may accuse his partner of infidelity.*

Examples of what can happen with the victim in the tension-building phase include:

- *The victim may experience uncertainty, anxiety, and fear.*
- *She may rationalize or make excuses for the abuser's behavior, including blaming herself.*
- *Even if the victim tries to appease her abusive partner, the second phase of intimate partner violence will occur.*

We call the second phase the explosion phase. It can last up to a few days. In the explosion phase, there is an act of physical violence that can vary in degree from a shove to homicide. In this phase:

- *The victim may experience sexual abuse and serious physical and psychological injuries.*
- *There may be physical destruction of property.*
- *The victim may minimize her injuries to appease her partner.*

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The third phase of intimate partner violence is referred to as the honeymoon phase. In this phase, the abusive partner feels regret and asks for forgiveness. He may promise that it will never happen again. This third phase can last for a few months. During the honeymoon phase:

- The victim may accept her partner's apologies and expressions of romance.*
- The abuser may blame his behavior on drinking or drugs and promise to "get clean."*
- The abuser may plead with the victim not to leave, give her gifts, and remind her how wonderful things were and could be again.*

Characteristics of the Abuser and Victim

There are some characteristics that are common among abusive persons. Victims also share some common characteristics. Do you remember our discussion about self-esteem from Session 4?

Question to prompt discussion:

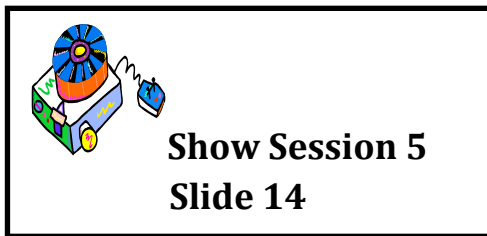
- Do you think a person in a violent relationship has high or low self-esteem?*

Possible responses:

- Low self-esteem — she would not put up with abuse otherwise.

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- Maybe she has high self-esteem. She might love her husband and children and not leave a violent relationship because of the children.
- She could have high self-esteem and stand by her man.



Characteristics of an Abuser

A violent or abusive person will typically exhibit:

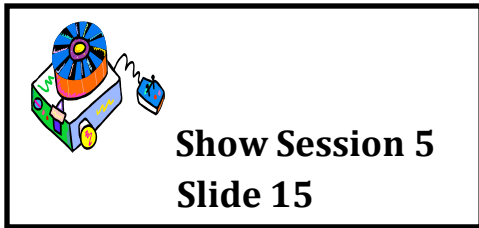
- A sense of ownership over victims
- A need for control
- A heightened sense of authority
- A belief that he does nothing wrong
- An ability to justify his actions to himself and others



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A violent or abusive person will typically exhibit:

- *A sense of ownership over victims. An abuser feels that his victims are his property and that he can force them to behave in a certain manner.*
- *A need for control. The abuser tries to control the behavior and attitudes of his partner and may act in a controlling way toward other members of the family.*
- *A heightened sense of authority. The abuser feels he has the authority to determine what are correct and incorrect behaviors and attitudes in his family.*
- *A belief that he does nothing wrong. The abuser believes his actions are the result of his partner's actions and, therefore, the partner is to blame.*
- *An ability to justify his actions to himself and others.*




Characteristics of a Victim

A victim may exhibit such characteristics as:

- Confusion about her partner
- Fear or terror
- Shame, humiliation, guilt
- Dependency, helplessness, indecision
- Isolating herself from friends and family
- Minimization and denial of the abuse, including protection of the abusive partner

It is important to remember there is no one type of woman who is a victim. Violence affects all women regardless of age, race, ethnicity, and income.

SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures



A victim may exhibit such characteristics as:

- *Confusion about her feelings toward her partner*
- *Fear or terror*
- *Shame, humiliation, guilt*
- *Dependency, helplessness, indecision*
- *Isolating herself from friends and family*
- *Minimization and denial of the abuse, including protection of the abusive partner*

It is important to remember there is no one type of woman who is a victim. Violence can affect all women, regardless of age, race, ethnicity, and income. This is just like HIV – any woman, regardless of age, race, ethnicity, and income – can get infected if she has unprotected sex with an infected partner.

Questions to prompt discussion:

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- *Do you have questions or anything you want to say about the issues we have been discussing?*
- *Does the cycle of intimate partner violence make sense to you?*



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

Questions to prompt discussion:

- *What are your reactions to the material we've covered so far?*
- *How do you think actual participants will respond to discussions of intimate partner violence?*
- *What suggestions do you have to engage participants in discussion?*

Possible responses:

- We could ask if anyone has a girlfriend or family member who has been in a violent relationship and ask her to tell us about it.
- We could ask about experiences with abusive men who are not intimate partners.

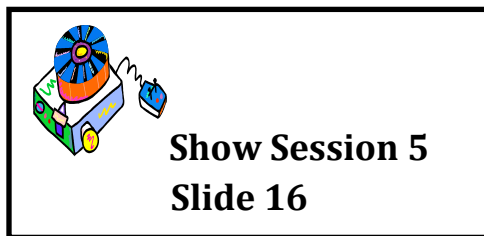


IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

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Why Are We Talking About Intimate Partner Violence in an HIV Prevention Program?


Explain to participants that there is a relationship between HIV and intimate partner violence.



HIV Risk, HIV Infection, and Intimate Partner Violence

If a woman has an abusive partner:

- She may be subject to violence when she tells him that she is HIV positive.
- She may be subject to violence when she asks him to get an HIV test or to use a condom.
- Because of intimate partner violence and fear, she may not get tested for HIV or STDs.



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There is a relationship between HIV risk, HIV infection, and intimate partner violence.

Women can experience intimate partner violence from an abusive partner if they become infected with HIV or if they try to prevent infection. More specifically, a woman is subject to violence when she tells an abusive partner that she is HIV positive. An abusive partner may prevent her from receiving medical care, and this will pose a threat to her health.

A woman is also vulnerable to violence when she asks an abusive partner to get an HIV test or to use a condom.

Because of intimate partner violence and fear, women may not get tested for HIV or STDs. If HIV and STDs are not treated, serious physical harm can occur.



HIV Risk, HIV Infection, and Intimate Partner Violence

- Women in violent relationships may be at risk for HIV because they are afraid to discuss condoms with their partners.
- Women who are victims of intimate partner violence and who have a history of violence may engage in risky sexual behaviors.



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Women in violent relationships may be at risk for HIV because they are afraid to discuss condoms with their partners. By not using condoms, women are not able to protect themselves from sexually transmitted diseases.

Women who are victims of intimate partner violence and who have a history of violence may engage in risky sexual behaviors; therefore, they are at an increased risk for HIV infection. Examples of risky behaviors are having unprotected sex with multiple partners or partners outside of marriage, having sex while high from alcohol or other drugs, and commercial sex work, or prostitution.

Impact of Violence on Families

Explain to participants that domestic violence and intimate partner violence impact the whole family.

Question to prompt discussion:

- *How does violence affect the family?*

Write participant responses on the newsprint.

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Possible responses:

- Physical injuries and illnesses
- Possible death
- Depression, anxiety, and other mental health problems
- Suspicion and fear
- Decrease in family communication

Domestic violence and intimate partner violence not only affect women, they impact everyone in the home, including the children. Even though women may think their children are safe because their partners have never abused them, children and adolescents who live in homes where domestic violence occurs or where they witness intimate partner violence are likely to experience behavioral and learning problems. They may have problems at school, abuse drugs and alcohol, and engage in risky sexual behaviors, putting themselves at risk of getting infected with HIV and other STDs. Children and adolescents are likely to experience mental health problems, such as depression and anxiety, as a result of exposure to family violence. Some may develop poor health. Just like their mothers, children may need counseling to better cope with their problems.

STRATEGIES FOR DEALING WITH RELATIONSHIP VIOLENCE



Discussion and Group Activity



Purpose: To identify why women stay in abusive relationships, and specific strategies and actions that women can take if they are in a violent relationship



Needed Equipment, Supplies, and Materials: Participant Workbooks, newsprint, markers, Slides 18–22



Time: 20 minutes

It's important for women to know specific strategies they can use to remain safe. The following activity focuses on why women stay in abusive relationships and what actions can be used to get out or minimize the violent situation.

It's time to have another group activity. Let's get into two groups.

Divide participants into two groups.

One group will discuss why women stay in abusive relationships. The other group will discuss what you should do if your partner becomes violent and attacks you.

Refer participants to “Session 5, Worksheet 3: Relationship Violence Scenarios.” Ask participants to discuss their topics. Tell the groups to identify

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a presenter for each group. After approximately five minutes, ask each group to present what they discussed.

Mention the following if not discussed.

Reasons why women stay with their aggressors include:

- Love
- Economic dependence
- Children
- Social pressure
- Machismo/Marianismo
- Not knowing what to do
- Fear of legal and immigration problems
- Not knowing where to get help

What to do if you are attacked:

- Get treatment for any injuries
- Call 911
- Leave the house and follow the steps in your action plan

Question to prompt discussion:

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- *If a friend told you she was living with a man who beat her up when he got drunk, what would you do?*

Possible responses:

- I'd tell her to leave him — she shouldn't put up with that.
- I would suggest that she talk to him when he's sober and give him information on programs for alcoholics.
- I would tell her to go to a program for family members of alcoholics, like Al-Anon.

Question to prompt discussion:

- *How would you talk about intimate partner violence with your daughter? What types of things could you mention?*

Possible responses:

- I wouldn't say anything unless she was involved with a violent man.
- I'd tell her never to get involved with someone who is abusive.
- I would point out the cycle of violence and that violent men don't change over night.

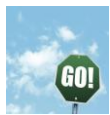


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Intimate partner violence is a very sensitive subject for many women. Some participants may know someone who has experienced violence or some may be experiencing violence at home. Be aware that discussing the topic of intimate partner violence may trigger unpleasant thoughts and emotions for participants. Be sensitive to the reaction of your group members. If a participant becomes very upset as a result of these discussions, be ready to identify in-house resources, such as mental health counseling or case management to assist her. It's a good idea to work with your agency to set up referrals for mental health and case management prior to implementing this session so you are prepared in case a participant does become upset.

Ask facilitators to brainstorm ways to help foster positive discussion among participants in an open, trusting, and accepting environment



IT'S TIME TO BE SEPA PARTICIPANTS! PLEASE WEAR YOUR SIGN WITH THE WORD "GO" FACING EVERYONE.

Safety Measures and Action Planning

Many women are involved with abusive partners and need strategies to keep themselves safe. The following discussion reviews strategies that women can take to maintain safety when a violent situation happens.

If you are involved with an abusive partner, the most important thing is that you stay safe and that any children in the household stay safe. Whether you leave or stay with your partner, your safety is our primary concern.

There are some things a woman can do to keep herself and her children safe. Reporting the abuse to the police is one option. If you are not able to or choose not to report an abusive incident to the police, and if you cannot or choose not to

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leave your partner, there are measures you can take to help your family stay safe.

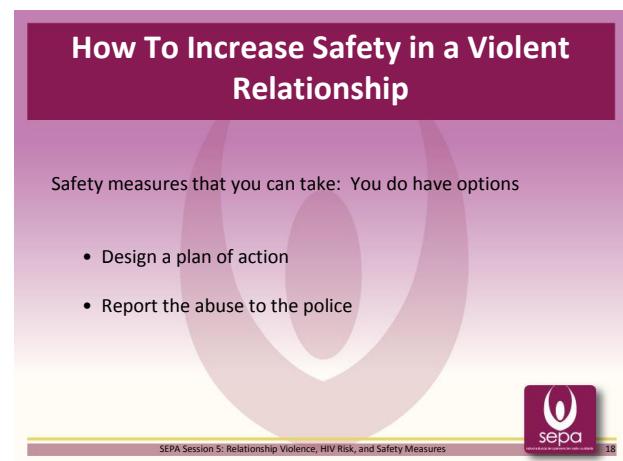
Question to prompt discussion:

- *What suggestions do you have for women who are in violent relationships but choose to stay with their partners?*

Write suggestions on the newsprint.

Possible responses:

- They should go into therapy or join a support group.
- They can take a class in self-defense.
- These women should talk to their children and provide advice on what the children should do.
- They should make sure their children get counseling.



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Unfortunately, there are times when a woman may need to get away from her abusive partner when violence is about to take place or even when it is occurring. Creating an action plan can help.



Action Plans for Women in Violent Relationships

- Hide weapons, firearms, or other objects in the house that can be used as weapons.
- Tell your children not to interfere when violence occurs.
- Plan an escape route from the apartment or house.
- Identify windows and doors to use to get out of your apartment or house.
- Memorize emergency and family telephone numbers.

SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

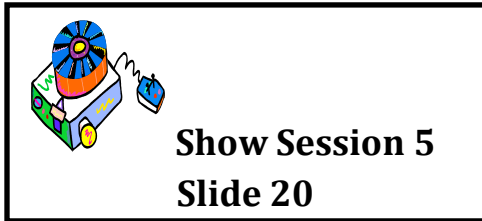


If you are a woman in a violent relationship at home alone, you should hide weapons and objects that can inflict harm. It's probably best not to get a weapon to defend yourself because your partner could get it away from you and use it against you. In addition, weapons pose a threat to your children.

Tell your children and any dependent family members living with you not to interfere when violence occurs, but to stay away from the incident.

Plan an escape route from the apartment or house by identifying windows and doors that can be used to get out quickly. If possible, plan more than one way to escape.

Memorize emergency and family telephone numbers. Phone numbers should not be written down or stored in your cell phone because your partner may find them and become suspicious. Suspicions may trigger a violent episode.



Action Plans for Women in Violent Relationships

- Pack an emergency suitcase for yourself and your children and keep it in a safe place, such as a friend's house.
- Agree on signs or codes that you can use with a neighbor to tell him or her that you need help.
- Identify a safe place where you and your children can go and know how you can get there.
- Learn about local shelters or safe houses that you can use.



SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

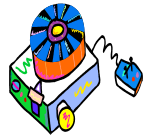
20

Pack a suitcase for yourself and your children with clothing, medications, cash, and important papers, such as documents of identification, passports, and immigration papers. Keep the suitcase in a safe place, such as a friend's house.

If you trust a neighbor not to talk to your partner, agree on signs or codes that you can use to tell him or her you need help. For example, you can open or close the window shades or curtains, or turn the lights on and off.

Identify a safe place where you and your children can go and know how to get there. Avoid going to the homes of friends or acquaintances who are also friends of the abuser. Make sure you have enough money for a taxi or to use public transportation.

Learn about local shelters or safe houses that you can use.



Show Session 5 Slide 21

What to Do When you Are About to be Attacked

- Follow the escape route in your action plan and go to a safe place.
- If escape is not possible:
 - Go to an area of your apartment or house that minimizes potential harm; avoid the bathroom and kitchen.
 - Try to stay in a room with a telephone or use your cell phone to call 911 if you decide to call the police.
 - Trust your judgment.
 - If all else fails and you are being attacked, protect yourself as best you can.



SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

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An action plan enables you to be prepared when you are threatened or attacked, or when you feel that violence is about to happen. Taking action may protect you and your children.

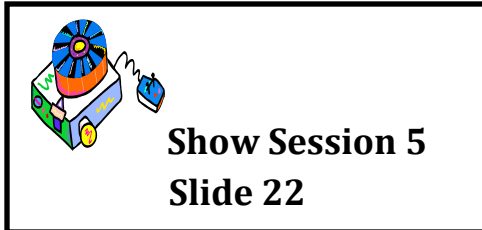
When violence is about to happen, follow the escape route in your action plan. Go to the safe place you identified and consider calling the police.

If you are about to be attacked and you can't escape, here are some things you can do:

- *Go to an area of your apartment or house that minimizes potential harm. Don't use a bathroom because it has hard surfaces. Don't use the kitchen because knives can be used as weapons.*
- *Try to stay in a room with a telephone or use your cell phone to call 911 if you decide to call the police. If you don't want to call the police, use the signal you agreed on with a friend or neighbor to let them know that you need help. Try to communicate if there are weapons in the home.*
- *Trust your judgment. Consider anything that you think will keep you safe and give you time to figure out what to do next. Sometimes it is best to flee; sometimes it may be best to try to win over your partner so he will calm down. Do what you believe is best to care for yourself and your children.*

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- *If all else fails and you are being attacked, put your arms and hands over your face and around your head. Try to cover your ribs with your elbows.*



What to Do if You Decide to Report the Abuse

- You can call 911 to reach the police and report an attack.
- You can visit the local police station to report an attack.
- Make sure the police take photographs of any injuries.
- Tell the police you want an order of protection, sometimes called a restraining order. The order is a legal document issued by a court; it requires one person to stop harming another person.



SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures

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If you decide to report the abuse:

- *You can call 911 to reach the police and report an attack.*
- *You can visit the local police station to report an attack.*
- *When you make a report, make sure the police take photographs of any injuries. Talk to the police about obtaining an order of protection or a restraining order. This is a legal document that requires the abuser to not contact or approach you.*

Questions to prompt discussion:

- *What is your reaction to the information that we have just discussed?*
- *What do you think about the safety measures and action planning we just reviewed?*

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- *What are the pros and cons or positive and negative aspects of reporting abuse to the police?*
- *If your best friend or sister were in an abusive relationship, would you want her to do these things?*

Possible responses:

- If you call the police, your partner will be furious and it can make the violence worse.
- You should call the police and get him removed from the house.
- Definitely get an order of protection.

What else do you want to say about the topic of violence and HIV risk? Do you have questions or comments?

If anyone wants more information on domestic violence, please let me know. I can connect you to agencies that can assist you and your children with your concerns.

Important Information for Non-Citizens

Now I want to tell you about programs and services that are available to everyone, regardless of immigration status. Examples include crisis counseling, child protection services, adult protective services, treatment for mental illness and substance abuse, and community food banks. Contact local immigrant services agencies for more information. You can find these agencies by searching the internet, telephone book, or talking to friends who may know about services in your community.

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Undocumented immigrants who are victims of domestic violence can apply for relief under a federal law called the Violence Against Women Act (VAWA). VAWA allows abused spouses and children of U.S. citizens and lawful permanent residents to obtain permanent resident status.

If you are legally married to a U.S. citizen or a lawful permanent resident, and you are abused by your spouse, you can self-petition for lawful status in the United States. Abused children of U.S. citizens and lawful permanent residents can also self-petition.

If you are legally married to a U.S. citizen or a lawful permanent resident, and you are abused by your spouse, VAWA provides relief from deportation or removal from the United States. In addition, VAWA provides relief for you and your children if they have been abused, even if you have not.

For information on VAWA, contact a domestic violence advocate and/or an attorney. Other legal services for women experiencing violence can be obtained by calling the Legal Resource Center on Violence Against Women: 1-800-556-4053.



Facilitator's Note:

Look up information on local domestic violence, social service, mental health, and immigrant service agencies and provide the information to participants at the end of the session. Include information on agencies that serve children.

WRAP-UP ACTIVITIES



Time: 10 minutes

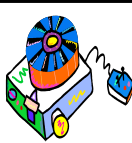
Review key messages, assign homework, and provide time for session evaluations.

Now we will review the main ideas we have discussed today.



Review

Refer participants to “Session 5, Worksheet 4: Session 5 Key Messages” in their workbooks. Show Slides 23–24 as key messages are reviewed.



**Show Session 5
Slide 23**

Session 5 Key Messages

- Violent relationships are not healthy relationships and they make it very difficult for women to negotiate condom use.
- Domestic violence negatively affects the physical and mental health of all members of the family.
- Intimate partner violence usually occurs in a cycle of three phases:
 - tension building phase
 - explosive phase
 - honeymoon phase

SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures



Violent relationships are not healthy relationships and they make it very difficult for women to negotiate condom use and protect their overall health.

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Domestic violence negatively affects the physical and mental health of all members of the family.

Intimate partner violence usually occurs in a cycle of three phases: the tension-building phase, the explosive phase, and the honeymoon phase.



Session 5 Key Messages

- Due in part to the cyclical nature of intimate partner violence and other considerations, such as economic dependence and fear, some women find it hard to leave abusive partners.
- Women who are victims of intimate partner violence can take measures to protect their safety and the safety of their children by designing a plan of action, reporting abuse to the police, and using community resources for victims of domestic and intimate partner violence.

SEPA Session 5: Relationship Violence, HIV Risk, and Safety Measures



Due in part to the cyclical nature of intimate partner violence and other considerations, such as economic dependence and fear, some women find it hard to leave abusive partners.

Women who are victims of intimate partner violence can take measures to protect their safety and the safety of their children by designing a plan of action, reporting abuse to the police, and using community resources for victims of intimate partner violence.



Facilitator's Note:

Remember that you are a resource for participants. Let them know that you are available if they want to talk, need help, or need more information on topics discussed during SEPA.

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Homework

Refer participants to “Session 5, Worksheet 5: Homework – Discuss Family Violence” in their workbooks.

Your final homework assignment is to discuss the issue of domestic violence with another woman in your community. Share what you learned today during the conversation. Come prepared to tell us what happened during the next session.



Evaluation

Refer participants to “Session 5, Worksheet 6: Session 5 Evaluation” in their workbooks. Ask participants to complete the evaluation worksheet.

Before we leave, please complete your evaluation sheets. When you are finished, tear the sheets out of your workbook and give them to me. I will use your feedback to improve SEPA.

Thank you and I look forward to seeing you at our next session, which is [date/day/time]. It will be our last session. We will review what we have learned from each other and celebrate together.

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Facilitator's Note:

Remind participants that you are available if they want to talk or need more information. Let them know you have information on agencies that can help them and their children.



IT'S TIME TO BE FACILITATORS! PLEASE WEAR YOUR SIGN WITH THE WORD "STOP" FACING EVERYONE.

FACILITATOR FEEDBACK



Time: 5 minutes

Initiate a feedback discussion with facilitators about the session. Ask facilitators to describe how the session felt and what concerns they may have about implementing the session with participants. Answer all facilitator questions about the session and about the day.

Questions to prompt discussion:

- *What are your comments about Session 5?*
- *What issues do you think you might confront when you implement the session with actual clients?*
- *What are your suggestions for addressing these issues?*

TEACH-BACK ASSIGNMENTS



Teach-Backs



Purpose: To provide facilitators with the opportunity to practice activities in Project SEPA



Needed Equipment, Supplies, and Materials: Teach-back handout for Training Day 3, teach-back feedback form



Time: 10 minutes

Assign facilitators teach-backs to be carried out during Day 4 of the training. Ask facilitators to volunteer, or pick facilitators' names out of a hat or bowl.

For Sessions 4 and 5, the table on the next page can be used to schedule teach-backs. It indicates important topics and activities that facilitators may need to practice.

Each teach-back should take approximately 15 minutes, and about five minutes should be allowed for feedback.

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Teach-Back Assignments for Sessions 4 and 5

Topic or Activity	Session #	Page(s) in Facilitators Guide	Slide #s	Facilitator's Name	Notes (Date and Time of Teach-Back)
Self-Esteem and How Does it Impact Relationships?	4	177-180	5-6		
Practicing Assertive Communication Skills	4	193-194	N/A		
Practicing Condom-Negotiation Skills I	4	203-205	N/A		
Dare To Say	5	221-222	N/A		
Conflict Resolution in Healthy Relationships	5	223-225	3		
Intimate Partner Violence	5	237-241	11-13		

You have now completed Sessions 1 through 5 of the training. How is everybody feeling?

Wait for responses.

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It is time, once again, to assign teach-backs. For those of you who are selected to do a teach-back based on Sessions 4 and 5, spend some time this evening practicing your assignments; use the Facilitator Guide for reference. Tomorrow, you will have approximately 15 minutes to conduct your teach-back. We have six teach-back exercises for tomorrow. Who would like to volunteer?

Wait for responses. If no one volunteers, randomly pick a facilitator from the hat for each teach-back.

Provide facilitators with the teach-back feedback form in the appendix of this curriculum and say:

We will use this feedback form to help focus our observations and comments. We don't give copies to the facilitators who perform the teach-backs.

Day 3 is complete. Thank you for being so cooperative! Does anyone have any questions related to SEPA or the training?

Wait for a response. After all questions have been addressed, note the start time and topics for the next day's training, and then say good-bye to participants.